

Monte Vista Grove Homes Volunteer Handbook



1

2

3

Table of Contents

Volunteer Application	1
Volunteer Orientation Checklist	3
MVGH Mission, Vision and Value Statements.....	5
Campus Map.....	7
Frequently Used Terms and Definitions.....	9
Dress Code and Other Personal Standards.....	11
Emergency Protocol/Infection Prevention.....	13
Instructions for Health Center/Hearth Volunteers.....	17
TB Immunization Reminder.....	19
Reporting In and Out	21
Resident Rights in Skilled Nursing Facilities.....	23
Resident Abuse.....	25
Information and Tips about Dementia for Volunteers.....	29
HIPAA.....	33
MVGH Volunteer Confidentiality.....	35
Acknowledgement and Receipt.....	37

)

)

)

MONTE VISTA GROVE HOMES
HEALTH CENTER/HEARTH
VOLUNTEER APPLICATION

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PROFESSION/TITLE _____

CURRENTLY EMPLOYED? _____

EMPLOYER _____ PHONE _____

STUDENT CURRENTLY? _____

HIGH SCHOOL _____ YEAR _____

COLLEGE _____ YEAR _____

HOME PHONE _____ WORK PHONE _____

CELL PHONE _____ E-MAIL _____

EMERGENCY CONTACT NAME _____ RELATIONSHIP _____

EMERGENCY CONTACT PHONE _____

Where did you hear about Monte Vista Grove Homes volunteer opportunities? _____

If you have a disability, what accommodations would you need to do this volunteer position?

Have you been convicted of a felony within the past five years? YES _____ NO _____

If YES, explain: _____

When are you available to volunteer?

Time of Day _____

Day(s) of the Week _____

How often per month? _____

MVGH VOLUNTEER APPLICATION -- PAGE 2

What particular skills, training, knowledge or interests would wish to utilize as a volunteer in this position? _____

What training, resources or support do you anticipate needing in this volunteer position? _____

Do you speak any other languages fluently other than English? _____

Anything more you would like us to know about you? _____

I hereby attest that the above information is true to the best of my knowledge.

SIGNATURE

DATE

Under 18 years of age must also have Parent or Guardian consent.

PARENT/GUARDIAN SIGNATURE

DATE

MUST READ

*Please dress appropriately in modest fashion (No tank tops, Low cut shirts, baggy pants, torn clothing, and etc.).

* No pictures maybe taken of Residents of Monte Vista Grove Homes unless you have written consent of the resident/s. No pictures taken can be uploaded in media outlets like the following : YouTube, Facebook, Twitter, Instagram, MySpace, or any other media outlets without the permission of the resident/sand Monte Vista Grove Homes.

*Please respect the facilities and our residents, this is their home.

Volunteer Orientation Checklist

Volunteer Name: _____ Date: _____

- 1. History of the Facility and Philosophy of Care
- 2. Volunteer Personnel Policies and Procedures
 - a. Orientation procedure (eating areas, meal tickets, etc.)
 - b. Weekly and daily schedules
 - c. Absenteeism, sick leave, personal time, etc.
 - d. Pre-Service and in-service education
 - e. Application and work cards (signs in/out record attendance)
 - f. Visiting hours and mail
 - g. Job assignment and expectations (Job Assignment is:)
- 3. Ethics
 - a. Rules of volunteer (personal appearance)
 - b. Has read and understands Residents' Rights and Responsibilities
 - c. Confidentiality
- 4. Tour of Building
 - a. Tour of all halls, utility rooms, patient rooms, etc.
 - b. Parking areas
 - c. Location of all exits, lavatories, etc.
 - d. Location of emergency equipment
 - e. Kitchen and dining rooms
 - f. Activity room library, lobbies, and storage room
 - g. Business office, administration offices, front desk, etc.
 - h. Nursing stations
 - i. Location of posted information, notices, etc.

5. Introduction of Personnel

a. Administrator, assistant administrator, director or nurses, activity coordinator, social worker, dietary services supervisor, maintenance, etc.

b. Designated supervisor

6. Fire and Disaster Plan and Accident Prevention

a. Location of fire extinguishers and fire alarms

b. Aware of disaster plans

c. Safety program, incidents

7. Discussion of Infection Control Procedures

a. Isolation

b. Communicable diseases

c. Handwashing

8. Review Glossary of Terms

9. TB Test

Volunteer

Date

Activity Director

Date

Reprinted with permission from Horizon/CMS Healthcare Corporation



MVGH MISSION STATEMENT

Monte Vista Grove Homes is a residential Christian ministry dedicated to meeting the needs of qualified retirees of the Presbyterian Church (USA). It seeks to support its residents within the context of a caring, Christian community that assists in meeting their spiritual, physical, social and emotional needs and interests.

MVGH VISION STATEMENT

Monte Vista Grove Homes is committed to being a leading multi-level retirement community in a faithful expression of Christian love towards its residents. Monte Vista Grove Homes seeks to provide superior facilities and services for older adult living, to reflect the inclusive nature of God's grace in an ethnically and economically diverse community; to expand facilities and services to meet present, future and changing needs, to exercise wise stewardship of resources and to serve as a welcoming community that fosters abundant life. Residents, trustees and staff contribute their various gifts with a sense of social responsibility to the larger community and to the Presbyterian Church (U.S.A.). Monte Vista Grove Homes strives for excellence in all things for the well-being of the residents and to the glory of God.

VALUE STATEMENTS

1. We believe in an inclusive environment that encourages teamwork, respect, integrity, dignity, and compassion for residents and co-workers.
2. We demonstrate good stewardship of our financial and material resources through fiscal responsibility and respect for the environment.
3. We believe in leadership through partnership with trustees, staff and residents.
4. We serve residents and the community with a spirit of joy and gratitude.
5. We look for opportunities to create excellence in long term care and to serve as a valuable resource to the surrounding community.
6. We honor the individual aging process in a holistic manner that encourages residents to flourish, be independent and energetic in both their professional and personal lives.
7. We believe that older adults are entitled to quality long-term care, a homelike environment and dignity throughout the aging process.
8. We support aging in place, lifelong learning and creativity.

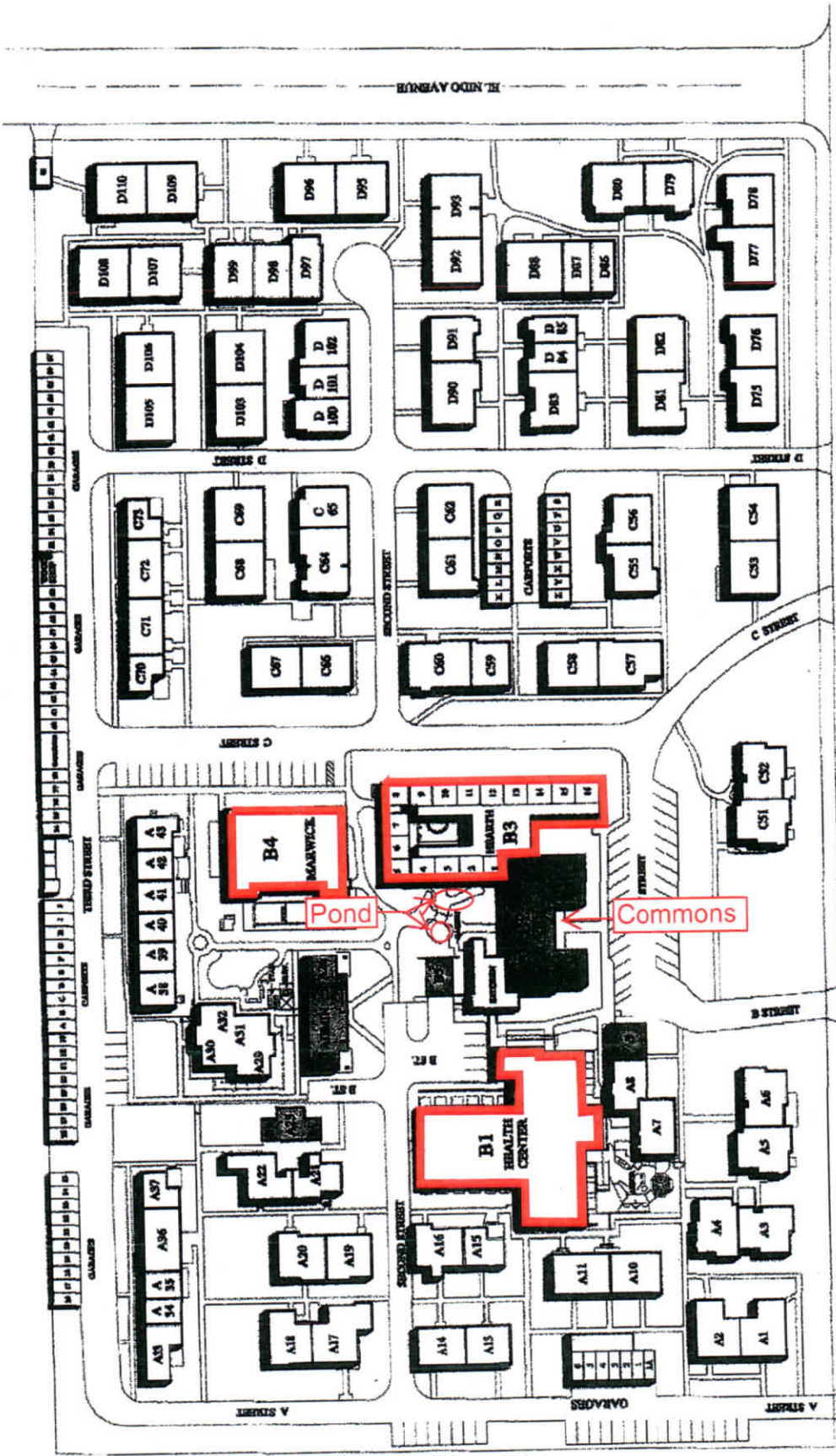


STATEMENT OF SERVICES

- Located in beautiful Pasadena on 13.5 acres. Monte Vista Grove Homes has provided quality long-term care services to its residents in a fiscally sound manner since 1924.
- Our original plot – plan was designed by locally prominent architect Myron Hunt.
- We are not owned or operated by the PCUSA but are considered a Regional Ministry of the Synod of California and Hawaii of the Presbyterian Church (U.S.A.).
- In 1961, we became a charter member of the Aging Services of California (now LeadingAge California).
- The Grove Campus, LLC, currently provides housing for 130 residents in the 77 Independent Living apartments on campus; where qualified ministers and missionaries of the PCUSA reside. Approximately 7 other apartments are used for guests.
- Campus residents contribute to the well-being of the operations of MVGH in the areas of government, volunteer activity and financial support.
- We operate a Medicare certified, 40 bed skilled nursing facility and a 16 apartment assisted living; both of which are open to the community at large. The skilled nursing and assisted living are licensed as a Continuing Care Retirement Community (CCRC) with the Dept. of Social Services and offers CCRC contracts for its Independent Living residents.
- Our skilled nursing is recognized for its high quality medical, rehabilitative and nursing services with staffing ratios well above the state minimum requirement. Dental, podiatry, optometry, audiology and massage services are available on site.
- Our Medical Director is a physician with the Huntington Medical Foundation, which is in partnership with nearby Huntington Memorial Hospital.
- The full service Food Service Department strives to meet individual preferences and welcomes catering opportunities for special events.
- Residents are encouraged to live to their highest potential. Supportive services in the appropriate residential level are in place to realize this goal.
- Campus residents reach out to provide enhancing services to the resident population and to members of the community at large.
- Aging in place is an honored philosophy throughout the campus.
- The Board of Trustees consists of residents, PCUSA ministers and lay people from the community.
- The Board of Trustees has signed the Quality First Covenant with LeadingAge, a national organization, and is committed to an ongoing philosophy of quality improvement.

MONTE VISTA GROVE HOMES

2889 SAN PASQUAL ST, PASADENA, CA 91107



- THE ART STUDIO
- WELLNESS CENTER
- LAUNDRY & BEAUTY SHOP
- THE GROVE STORE



)

)

)

**MONTE VISTA GROVE HOMES
FREQUENTLY USED TERMS AND DEFINITIONS**

AL	"Assisted Living" - aka The Hearth; licensed with the Dept. of Social Services as an RCFE to provide assisted living housing.
CNA	"Certified Nurse Assistant" – must have criminal record clearance, 160 hours of training (60 classroom/100 clinical), 16-hr orientation upon hire. Able to provide assistance with grooming, toileting, bathing, dressing, eating, transferring, and activities.
HEARTH	The name for the assisted living level of care at MVGH.
HEALTH CENTER	The name for the skilled nursing level of care at MVGH.
HIPAA	"Health Insurance Portability and Accountability Act" – Passed by Congress in 1996 and primarily does the following: Provides and ability to transfer and continue health insurance coverage when an individual changes or loses their job; reduces health care fraud and abuse; mandates industry-wide standards for health care information; and, requires the protection and confidential handling of protected health information.
IL	"Independent Living" – This refers to the general campus, which is unlicensed senior housing. Residents have limited medical oversight/services. Staff assist in a variety of ways.
LVN	"Licensed Vocational Nurse" – must have criminal record clearance; completion of an approved Vocational Nursing Program; licensed to provide most forms of nursing care including medications, receiving physicians orders, wound treatment, etc.
MEDICAL DIRECTOR	The physician contracted by the facility (MVGH) to oversee the medical operations of the skilled nursing facility. He/she may or may not be the physician of record for residents.
MEMORY CARE	Level of care, licensed as Assisted Living (see RCFE), but with staff and activity program specifically geared towards individuals with dementia. It is a secure environment. Licensed by the Department of Social Services (see DSS).
MVGH	"Monte Vista Grove Homes" – the legal name of the CCRC portion of the campus.
OT	"Occupational Therapy" – therapy focusing on the upper body and tasks such as dressing, bathing, brushing teeth, etc.
PT	"Physical Therapy" – therapy focusing on the lower body and tasks such as transferring, walking, sitting, and standing.
RCFE	"Residential Care Facility for the Elderly" – the technical term used by the Dept. of Social Services to refer to the assisted living.
REHAB	"Rehabilitation" – refers to physical, occupational and speech therapy.
RESIDENT	The preferred term for an individual living in independent, assisted or skilled nursing (rather than "patient").

**MONTE VISTA GROVE HOMES
FREQUENTLY USED TERMS AND DEFINITIONS**

RN	“Registered Nurse” – must pass criminal record clearance, graduate from a nursing school with an Associate Degree, Bachelor of Science, or Entry Level Master’s Program in Nursing.
RNA	“Restorative Nurse Assistant” – a CNA with additional training and certification to guide range of motion exercises, walking and transfer assistance.
SNF	“Skilled Nursing Facility” – licensed by the Calif. Dept. of Public Health to provide 24 hr nursing care.
ST	“Speech Therapy” – therapy focusing on speech and swallowing.
WELLNESS	For MVGH, this refers to the whole person. The new Wellness Center will have space for group exercise, fixed exercise equipment, outpatient physical & occupational therapies, massage therapy, room for education on a variety of topics, etc. The Wellness Committee seeks to provide programming that addresses the spiritual, emotional, intellectual, and physical needs of MVGH residents.

Dress Code and Other Personal Standards

Volunteers are expected to wear clothing appropriate for the nature of our business and the type of work performed. Clothing should be neat, clean and tasteful. Avoid clothing that can create a safety hazard.

Nails

- Must be neatly manicured and of reasonable length. No restrictions on artificial nails or adornments as long as they do not detract from professional appearance or interfere with assigned work.

Business/Casual Attire

- Business and casual attire should be clean, in good repair, and free of stains or discolorations.
- Clothing must fit appropriately and allow safe body mechanics.

Shoes

- Shoes shall be clean and in good repair and appropriate for the employee's or volunteer's work assignment.
- Shoes with flexible soles, low heels and closed toes are recommended for safety and optimum body mechanics.

Jewelry

- Jewelry should be appropriate and safe for the work environment and not pose a risk to the employees, other volunteers or patients (i.e., large hoop or dangling earrings).
- Jewelry should be kept to a minimum.

Hygiene

- Employees and volunteers shall be clean and free from strong odors, including perfumed fragrances.
- Hair color is to be within the normal color range. Hair, sideburns, mustaches and/or beards shall be clean, neat and well-trimmed.
- Hairstyle is to be within reasonable healthcare business standards.

The following grooming, clothing and/or adornments are not allowed during scheduled work time:

- Casual pants including sweatpants, thermal pants, cargo pants.
- Sweatshirts, thermal underwear shirts, tank tops, sleeveless tops, spaghetti strap tops.
- Clothing containing any sayings, advertising, political statement, etc. Clothing bearing a small manufacturer's logo (such as Nike, The North Face, Columbia) are allowed.
- Revealing styles such as sheer fabrics, low necklines or short dress or skirt lengths (skirt length should not be shorter than 2" above the knee)
- Body piercing, except one minimal nose stud or two earrings per ear, must not be visible during working hours.
- Large and/or inappropriate tattoos must not be visible while a volunteer is on scheduled work time.

1

2

3

Emergency Protocol/Infection Prevention

Volunteer Safety:

In case of an emergency and you are with a resident on campus, please take resident back to the Health Center (do not leave resident unattended). Emergency exits are located at the end of the North, East and West Halls. Fire extinguishers are found in all hallways and the kitchen area.

Using a fire extinguisher:

Most fire extinguishers operate using the following **P.A.S.S.** technique:

P: Pull the pin.

A: Aim low, pointing the extinguisher nozzle (or its horn or hose) at the base of the fire.

S: Squeeze the handle to release the extinguishing agent.

S: Sweep nozzle at base of fire.

Upon discovery of a fire or for fire drills, practice the following:

R- Rescue/Remove anyone from immediate

A- Alarm activation

C- Confine the fire by closing all the doors

E- Extinguish the fire if safe to do and/or

Evacuate when the order is given

Earthquake:

Wait in your safe place until the shaking stops, then check to see if you are hurt. You will be better able to help others if you take care of yourself first, and then check the people around you. Move carefully and watch out for things that have fallen or broken, creating hazards. Be ready for aftershocks.

Resident Safety:

At MVGH, our residents' rooms are supplied with emergency pull cords and can be found in all restrooms on campus. These should be pulled only in case of an emergency. If a resident is uncomfortable, a member of the nursing staff is to be notified immediately. Volunteers may not

transfer residents to or from wheelchairs. They must always ask a member of the nursing staff to do this. Always inform a resident that you are going to move them in their wheelchair before doing so. Proceed forward cautiously, making sure that the residents' feet are on the foot pedals and that their elbows are safe from bumping. If no foot pedals are present, the residents' feet should be raised before proceeding. Never pull a wheelchair backwards, except to turn or reposition it. All safety concerns should be reported to the Life Engagement Coordinators, Charge Nurse or Administrator immediately. Emergency pull cords are located in all resident restrooms on campus.

Infection Prevention Tips

Hand Hygiene

Most infections are spread by picking up germs on our hands from contact with other people or by touching contaminated surfaces. Clean, healthy, intact skin is the best barrier against infection. One of the best ways to stay healthy is to wash or decontaminate your hands. "Hand hygiene" describes either hand washing or decontaminating hands. Washing hands removes the germs from your hands. Decontaminating kills the germs on your hands with the use of alcohol-based hand rubs. If your hands are visibly dirty, wash away the dirt. Otherwise, decontamination is a convenient way to kill the germs.

When should I perform hand hygiene?

- Before and after you eat
- Before and after treating a cut or wound
- Before and after caring for someone who is ill
- After using the restroom
- After you sneeze or cough
- After touching animals and pets
- And anytime your hands are visibly dirty

How do I wash my hands well?

- Wet hands with warm water that is a comfortable temperature.
- Apply soap and rub hands together for at least 20 seconds.
- Be sure to cover all surfaces, especially under nails, around rings, your thumbs and around your wrists.
- Rinse hands well.
- Dry your hands with a paper towel or clean cloth towel.
- Use the towel to turn off the faucets.

How do I use alcohol-based hand rubs?

- Apply a quarter-sized amount to one hand.
- Rub your hands together until they are dry, making sure that you cover all surfaces of your hands (do not rinse your hands).

Cover your cough

Many respiratory diseases can be spread person-to-person by respiratory droplets.

How do I prevent spreading a respiratory infection to others?

- Cover your mouth and nose with a tissue when sneezing or coughing.
- If a tissue is not available, sneeze or cough into your sleeve to contain the droplets (don't sneeze or cough into your hands).
- Clean hands with soap and water or decontaminate hands with an alcohol-based hand rub.
- Stay home if you are ill.

Keep your immunizations up-to-date

What vaccines do I need?

- Get your flu shot every year. Flu viruses change slightly each year so it is important to get vaccinated every year, beginning in October and through the season, which lasts until May.
- TB Test should be taken every year. Unless it is a Chest X-ray, which is given every 3 years.

2

3

4

Instructions for Health Center/Hearth Volunteers Re: TB Tests

ALL VOLUNTEERS WHO VOLUNTEER IN THE HEALTH CENTER OR HEARTH MORE THAN ONCE A MONTH MUST HAVE A TB TEST ONCE A YEAR.

The Activity Director will give you an "*Individual Tuberculosis Screening*" form. Take it to one of the following people: Eden Conora (Director of Nursing), or any Charge Nurse. They will give you the test and they will fill out a portion of the form. Keep the form. Return **BETWEEN 48 AND 72 HOURS** to have the test "read" by the nurse and she will complete the form.

Return the completed form to the Activity Director for filing in the Activity office. You may have a copy for your files if you wish. The Activity Director will notify you in one year that your TB test is due again.

NEW volunteers must also have a second test two weeks after the first test. Please keep the form with you until the second test is complete, and then return the form to the Activity Director. She will notify you annually thereafter when the test is due.

Note: If you are a volunteer who lives in the Hearth you do not need a test as all Hearth residents are TB tested annually.

Any medical questions you might have regarding the TB test, please contact Eden Conora, Director of Nursing, at (626) 792-2712, ext. 424.

✓

✓

✓

Date:

To: _____

From: Kathya Climaco, Activity Director

Through: Eden Conora, Director of Nursing

Subject: TB Immunization Reminder

All volunteers that serve MORE THAN ONCE A MONTH at Health Center and/or Hearth are required to have a yearly TB test.

For your convenience, you may take the test free of charge here at Monte Vista Grove Health Center. Please contact Eden Conora, Director of Nursing, at Extension 424 to schedule an appointment.

Thank you in advance for your prompt response.

Kathya Climaco
Activity Director

✓

✓

✓

Reporting In and Out

Policy Statement

Volunteers must sign in/out upon arrival/departure from the facility.

Policy Interpretation and Implementation

1. Volunteers must report to the Activity Director upon arrival and sign in on the volunteer sign-in record located at the Nurses' Station.
2. Volunteers should be punctual, as well as dependable, in reporting for their assignment.
3. Should volunteers be unable to perform their assignment as scheduled, they should notify the Activity or Volunteer Director in advance, if possible.
4. Volunteers must sign out upon leaving the facility.

Reporting Practices

Policy Statement

Volunteers must report certain conditions and/or situations to the Activity Director or Charge Nurse.

Policy Interpretation and Implementation

1. Each Volunteer must report to his or her supervisor or Charge Nurse the following information:
 - a. All requests made by the residents that the volunteer cannot take care of himself/herself;
 - b. Any change in a resident's condition, reaction to a change, what the volunteer did for the resident, and any accidents;
 - c. Any broken or damaged equipment;
 - d. Any unsafe working areas or conditions;
 - e. Any unusual occurrences;
 - f. Failure of any staff or volunteer either to **inform** residents when activities are occurring or to **encourage** resident involvement in activities, and;
 - g. Any resident abuse by anyone, including but not necessarily limited to facility staff, other residents, consultants, volunteers, family members, etc.

1

2

3

Resident Rights in Skilled Nursing Facilities

A Summary of Nursing Home Residents' Rights

Nursing Home residents still retain their **civil rights** and are still entitled to their basic human rights.

- The nursing home must provide each resident safe and adequate care in a clean and comfortable environment. The resident must be free from verbal, sexual, physical or mental abuse.
- A nursing facility must have the same policies and practices for transfer, discharge, and for the provision of services for all individuals regardless of their source of payment.
- The facility shall not require a third party to guarantee payment as a condition of admission, expedited admission or continued stay in the facility.
- Residents must be informed of their legal rights, services available in the facility and of related charges for such services during their stay at the facility. This information must be provided orally and in writing, at the time of admission to the facility and periodically during the resident's stay.
- Residents who are entitled to Medi-Cal assistance must be informed of the items and services that are included in basic services under Medi-Cal. The resident must not be charged for these items.

A nursing facility must **protect and promote the rights** of each resident. These rights are:

- The right to be fully informed in advance about their care, and to be informed before any changes are made in their care that may affect their well-being. They have the right to fully participate in planning their care on an ongoing basis.
- Each resident must be given an opportunity to refuse treatment (which must be documented in the record).
- The right to be free from physical or mental abuse, corporal punishment, and involuntary seclusion. They have the right to be free from any physical or chemical restraints that are not required to treat the resident's medical symptoms. They may not be restrained for purposes of discipline or convenience of staff.
- Physical and chemical restraints may be used to ensure the physical safety of the resident or other residents. These restraints may be used only with a doctor's written order and should be the treatment of last resort. The orders must be written into the care plan. The order must specify the duration and circumstances under which the restraints are to be used.
- The right to privacy concerning accommodations, medical treatment, written and verbal communications, visits, and meetings of family and of resident groups.
- The right to voice concerns or recommendations about care that is (or fails to be) given, without discrimination or reprisal for voicing those concerns. The facility will promptly attempt to resolve the concerns of the resident. Such concerns or recommendations are to be submitted free from interference, coercion, discrimination, or reprisal.
- The right to confidentiality of personal and clinical records.
- The right to inspect his/her records.
- The right to receive notice before the room or roommate of the resident is changed.
- The right of the resident to organize and participate in resident groups in the facility and to participate in social, religious, and community activities that do not interfere with the rights of other residents in the facility.
- The right of the resident's family to meet in the facility with the families of other residents in the facility.

- The right to examine, upon reasonable request, the results of the most recent survey of the facility and any plan of correction in effect with respect to the facility.
- The right to file a complaint with a State survey and certification agency about resident abuse and neglect and misappropriation of resident property in the facility.
- The right to immediate access to the Long-Term Care Ombudsman.
- The right to visit with family or others, subject to the resident's right to deny or withdraw consent at any time.

Transfer and discharge rights

A nursing facility must permit each resident to remain in the facility and must not transfer or discharge the resident from the facility unless:

- Medical reasons (beyond the level of care);
- His/her welfare or welfare of other residents;
- The safety or health of individuals in the facility is endangered;
- The resident has failed to pay an allowable charge imposed by the facility for an item or services requested by the resident.

The basis for the transfer or discharge must be documented in the resident's clinical record. The documentation must be made by the resident's physician, and the facility. A nursing facility must provide sufficient preparation and orientation to the resident to ensure safe and orderly transfer or discharge from the facility.

Before transferring or discharging of a resident, a nursing facility must:

- Notify the resident (and, if known, an immediate family member of the resident or legal representative) of the transfer or discharge and the reasons for this discharge;
- The notice must be made at least thirty (30) days in advance of the resident's transfer or discharge except in emergency situations, license suspension, revocation or decertification;
- Each notice must inform the resident of the resident's right to appeal the transfer or discharge. The notice must include the name, mailing address, and telephone number of the long-term care ombudsman.

Notice about bed-hold policy and readmission

Before and at the time of transfer for hospitalization, a nursing facility must provide written information to the resident and an immediate family member or legal representative concerning the bed-hold policies of the facility.

A nursing facility must establish and follow a written policy regarding bed holds for residents who are eligible for Medi-Cal and who are transferred from the facility to the acute hospital. This policy will also permit residents to be readmitted to the facility if the hospitalization exceeds the period paid for the bed hold. The resident will be afforded the first available bed in a semiprivate room, if at the time of readmission, the resident requires the services provided by the facility.

For more copies of this summary or for a complete copy of the law, 42 U.S.C. Section 1396r©, please contact the Sonoma County Ombudsman Program at **707-526-4108**.

Information and Tips about Dementia for Volunteers.

Thank you for volunteering at Monte Vista Grove Homes – Health Center. Many of our residents can no longer take care of themselves the way they used to and need more help. As a volunteer, you play a vital part in our residents' lives. Building relationships and engaging with our residents is key to success. It plays a big role in our residents' wellness. Many of the residents in the Health Center have Dementia/ Alzheimer's. Below I have made a guide with information and tips composed from the Alzheimer's Association about dementia and what it is. Please read the following information as it will help you understand the disease.

The word dementia describes a set of symptoms that may include memory loss and difficulties with thinking, problem-solving or language. Dementia is caused when the brain is damaged by diseases, such as Alzheimer's disease or a series of strokes. Dementia is progressive, which means the symptoms will gradually get worse.

When a person with dementia finds that their mental abilities are declining, they often feel vulnerable and in need of reassurance and support. The people closest to them - including their caregivers, friends and family - need to do everything they can to help the person to retain their sense of identity and feelings of self-worth.

Your Role as Volunteers.

Simply being with the person and showing them love and affection is the most important thing that a young person can do.

- Spending time with the person is pleasurable – activities could include going for a walk together, playing games, sorting objects, listening to music or doing crafts. You can ask the activities assistant or director for trivia books, games, and puzzles.
- Talk about the person as they were before, what they did, or ask about family.
- Be aware of things that the person with dementia may find upsetting or confusing and be able to provide reassurance. Do not get upset, simply give the resident time to express themselves.

Tips: communicating with someone with dementia

Before you speak

- When possible, if you are rushing or feeling stressed, try to take a moment to calm yourself.
- Consider what you are going to talk about. It may be useful to have an idea for a particular topic ready, or to ask yourself what you want to achieve from the conversation.
- Make sure you have the person's full attention.
- Make sure that the person can see you clearly.
- Try to make eye contact. This will help the person focus on you.
- Minimize competing noises, such as the radio, TV, or other people's conversations.

How to speak

- Speak clearly and calmly.
- Speak at a slightly slower pace, allowing time between sentences for the person to process the information and to respond. This might seem like an uncomfortable pause to you but it is important for supporting the person to communicate.
- Avoid speaking sharply or raising your voice, as this may distress the person.
- Use short, simple sentences.
- Don't talk about people with dementia as if they are not there or talk to them as you would to a young child - show respect and patience.
- Humor can help to bring you closer together, and may relieve the pressure. Try to laugh together about misunderstandings and mistakes - it can help.
- Try to include the person in conversations with others. You may find this easier if you adapt the way you say things slightly. Being included in social groups can help a person with dementia to preserve their sense of identity. It can also help to reduce feelings of exclusion and isolation.

What to say

- Try to be positive.
- Avoid asking too many direct questions. People with dementia can become frustrated if they can't find the answer. If you have to, ask questions one at a time, and phrase them in a way that allows for a 'yes' or 'no' answer.
- Try not to ask the person to make complicated decisions. Giving someone a choice is important where they can cope with it, but too many options can be confusing and frustrating.
- If the person doesn't understand what you are saying, try to get the message across in a different way rather than simply repeating the same thing. You could try breaking down complex explanations into smaller parts and perhaps also use written words or objects.
- As dementia progresses, the person may become confused about what is true and not true. If the person says something you know to be incorrect, try to find ways of steering the conversation around the subject rather than contradicting them directly. Try to see behind the content to the meaning or feelings they are sharing.

Listening

- Listen carefully to what the person is saying, and give them plenty of encouragement.
- When you haven't understood fully, tell the person what you have understood and check with them to see if you are right.
- If the person has difficulty finding the right word or finishing a sentence, ask them to explain it in a different way. Listen out for clues. Also pay attention to their body language. The expression on their face and the way they hold themselves and move about can give you clear signals about how they are feeling.
- If the person is feeling sad, let them express their feelings without trying to make them laugh. Sometimes the best thing to do is to just listen, and show that you care.
- Due to memory loss, some people won't remember things such as their medical history, family and friends. You will need to use your judgement and act appropriately around what they've said. For example, they might say that they have just eaten when you know they haven't.

Body language and physical contact

- A person with dementia will read your body language. Sudden movements or a tense facial expression may cause upset or distress, and can make communication more difficult.
- Make sure that your body language and facial expression match what you are saying.
- Never stand too close or stand over someone to communicate: it can feel intimidating. Instead, respect the person's personal space and drop below their eye level. This will help the person to feel more in control of the situation.
- Use physical contact to communicate your care and affection, and to provide reassurance - don't underestimate the reassurance you can give by holding or patting the person's hand or putting your arm around them, if it feels right.

Tips: communicating with someone with dementia and hearing loss

Most people over 70 will have some degree of hearing loss. Many will have significant hearing loss or may be deaf. People who are born deaf or become deaf at a very young age are said to have profound or 'cultural' deafness.

If you are trying to communicate with a person with dementia but they are unresponsive, consider that hearing loss may be a factor. It might just be that the person has also lost the ability to communicate verbally.

How you can help

- Speak slightly more slowly than usual but try to keep the natural rhythms of your speech.
- Do not shout or over-exaggerate words as this will distort your speech.
- Do not cover your mouth as this will interfere with lip-reading. The person should be able to see your face clearly - get onto the same level as them so that they are looking at your face straight on.
- Consider the physical environment - make sure the area is quiet and well-lit.
- Use visual clues - write your message down if the person is able to read and use objects or pictures to help the person understand. For example, show the person the meals they can choose from.

I hope this guide will help you in the experience you have with our residents. If you have any more questions please feel free to ask me or any nurse available.

Thank you for taking the time to be a part of our lives.

Kathya Climaco

Activities Director
Monte Vista Grove Homes
2889 San Pasqual St.
Pasadena, Ca 91107

)

)

)

Health Insurance Portability And Accountability Act of 2003 (HIPAA)

Overview

- HIPAA is a law passed by congress in 1996 and implemented in 2003.
- HIPAA sets national standards for the protection of patient information.
- HIPAA applies to ALL health care providers: hospitals, physicians, insurance companies, labs, home care companies and surgery centers
- HIPAA covers ALL forms of protected health information☐ oral, written and electronic.

As a volunteer, it is your responsibility to take the confidentiality of patient information seriously. Anytime volunteers come in contact with patient information (or any protected health information) written, spoken or electronically transmitted, they become involved with some facet of the HIPAA regulations! It is for this reason that the law requires awareness training for all healthcare personnel, including volunteers.

Reporting Violations

It is EVERYONE'S responsibility to report violations, or wrong doings. Whether someone received patient information improperly, or shared patient information in the wrong way, everyone has a responsibility to report violations. When in doubt ASK!!

Your department supervisor or the Volunteer Director is a good place to start for answers to your questions or for reporting issues.

)

)

)

MVGH Volunteer Confidentiality

Each volunteer is responsible for safeguarding the confidential information obtained during volunteer work.

In the course of your work, you may have access to confidential information regarding Monte Vista Grove Homes, its suppliers, its residents, its donors, or perhaps even fellow volunteers or employees. You have a responsibility to prevent revealing or divulging any such information unless it is necessary for you to do so in the performance of your duties. Access to confidential information should be on a "need-to-know" basis and must be authorized by your supervisor. Any breach of this policy will not be tolerated and legal action may be taken by the Company.

I, _____, agree to these terms and will abide by, adhere to and honor all of the above.

SIGNATURE OF VOLUNTEER DATE

Under 18 years of age must also have Parent or Guardian consent.

PARENT/GUARDIAN SIGNATURE DATE

SIGNATURE OF VOLUNTEER COORDINATOR DATE

OFFICE USE ONLY

✓

✓

✓

Acknowledgement of Receipt

Receipt and review of policies form

Signature on this receipt acknowledges that you have reviewed the Monte Vista Grove Homes' Volunteer Handbook. Please sign and date the receipt.

Volunteer Handbook Statement of Certification

I, _____, certify that I have received and reviewed the Monte Vista Grove Homes' Volunteer Handbook.

I further understand that, by signing this statement as required, I am indicating that I have read the Volunteer Handbook and understand its contents, or have discussed questions I have with a Monte Vista Grove Homes staff member. I also realize that this statement will become a permanent part of my volunteer personnel file.

Volunteer Name (Please Print)

Signature

Address

City, State, Zip

Date

*Please print, sign and return to:

Kathya Climaco, Life Engagement Coordinator

✓

✓

✓